

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N03000010916

**Entity Name:** POLYNESIAN AT ISLANDS AT DORAL NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

3934 S.W. 8TH STREET  
SUITE 303  
CORAL GABLES, FL 33134

**Current Mailing Address:**

3934 S.W. 8TH STREET  
SUITE 303  
CORAL GABLES, FL 33134 US

**FEI Number:** 30-0311177

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SALOMON, KANNER, DAMIAN & RODRIGUEZ, P.A.  
C/O VINCENT E. DAMIAN, JR., ESQ.  
80 S.W. EIGHTH STREET SUITE 2550  
MIAMI, FL 33130 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name WOODWARD, DAVE  
Address 3934 S.W. 8TH STREET  
303  
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER  
Name SARMIENTO, MONICA  
Address 3934 SW 8TH STREET  
303  
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY  
Name PAYARES, ALVARO  
Address 3934 SW 8TH STREET  
303  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name SALAS, JOSE  
Address 3934 SW 8TH STREET  
303  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name AVILA, RICARDO  
Address 3934 SW 8TH STREET  
303  
City-State-Zip: CORAL GABLES FL 33134

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVE WOODWARD

**PRESIDENT**

**07/14/2014**

